

REGISTER UPDATE FORM

STATE OF MAINE BUREAU OF HUMAN RESOURCES

NAME	SOCIAL SECURITY NUMBER
CLASSIFICATION	SCORE

Candidates are asked to specify the geographic areas of the State and the conditions under which they will accept employment by completing the form below. You may select or change the conditions of your referral by checking the appropriate boxes.

MARK THE AREA(S) AND CONDITION(S) OF EMPLOYMENT SUITABLE TO YOU. YOUR NAME WILL NOT BE REFERRED TO POSITIONS IN AREAS OR CONDITIONS NOT DESIGNATED.

F = Full Time

P = Part Time

T = Temporary

S = Seasonal

	F	P	T	S		F	P	T	S		F	P	T	S
0 All Counties					21 HANCOCK County					42 PISCATAQUIS County				
1 ANDROSCOGGIN County					22 Bar Harbor					43 Dover - Foxcroft				
2 Lewiston					23 Bucksport					44 Greenville				
3 Livermore					24 Ellsworth					45 SAGadahoc County				
4 AROOSTOOK County					25 KENNEBEC County					46 Bath				
5 Ashland					26 Augusta					48 SOMERSET County				
6 Caribou					27 Augusta - AMHI					49 Skowhegan				
7 Fort Kent					28 Waterville					50 WALDO County				
8 Houlton					29 KNOX County					51 Belfast				
9 Madawaska					30 Rockland					52 WASHINGTON County				
10 Presque Isle					31 Thomaston					53 Bucks Harbor DCF				
11 Van Buren					32 LINCOLN County					54 Calais				
12 CUMBERLAND County					33 Boothbay					55 Eastport				
13 Portland					34 OXFORD County					56 Machias				
14 Brunswick					35 Norway					57 YORK County				
15 Baxter School					36 Rumford					58 Biddeford				
16 South Portland					37 PENOBSHOT County					59 Kittery				
17 Windham - MCC					38 Bangor					60 Saco				
18 FRANKLIN County					39 Bangor - BMHI					61 Sanford				
19 Farmington					40 Charleston									
20 Rangeley					41 Millinocket									

ACTIVE/INACTIVE:

<input type="checkbox"/>	Place my name on the Inactive Employment Register for the classification identified above	<input type="checkbox"/>	Reactivate my name on the Employment Register identified above
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If you wish to limit yourself to specific conditions (e.g., only for / not for a specific Department, etc.), list your preferences below:

NAME/ADDRESS/PHONE NUMBER CHANGES:

NAME	TELEPHONE
HOME ADDRESS	HOME: WORK:
ADDRESS 1 _____	
ADDRESS 2 _____ CITY _____ STATE _____ ZIP CODE _____	